FORM D

21-57687

03016275

UNITED STATES
SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549 RECEIVED

JAN 0 9 2003

FORM D

NOTICE OF SALE OF SECURITIES 155 PURSUANT TO REGULATION 6, SECTION 4(6), AND/OR

UNIFORM LIMITED OFFERING EXEMPTION

SEC	USE ON	LY
Prefix	1	Serial
DAT	RECEIV	ED

Name of Offering (check if this is an a NEON LIBERTY EMERGING MARKET	mendment and name has changed, and S FUND LP: Offering of Limited P	~ /		DLOG
Filing Under (Check box(es) that apply):	☐ Rule 504 ☐ Rule 505	X Rule 506	Section 4(6)	□ nroe
Type of Filing: New Filing	☐ Amendment			
	A. BASIC IDENT	TIFICATION DATA		
1. Enter the information requested about the	issuer	_		
Name of Issuer (check if this is an a	amendment and name has changed, an	d indicate change.)		
Neon Liberty Emerging Markets Fund LP		_		
Address of Executive Offices	(Number and Street, C	city, State, Zip Code)	Telephone Number (In	cluding Area Code)
c/o Neon Liberty Capital Management LL	C, 230 Park Avenue, Suite 865, New	York, NY 10169	(212) 983-4630	
Address of Principal Business Operations	(Number and Street, C	city, State, Zip Code)	Telephone Number (In	cluding Area Code)
(if different from Executive Offices)		_		
Brief Description of Business				
To operate as a private investment fund.		_		·
Type of Business Organization		···-		PROCESSED
corporation	Imited partnership, already for	med	other (please spe	cify):
☐ business trust	☐ limited partnership, to be formed	l		JAN 1 3 2003
Actual or Estimated Date of Incorporation or	<u> </u>	2 0 2		THOMSON FINANCIAL
Jurisdiction of Incorporation or Organization	CN for Canada; FN for other foreig			D E

GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When to File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

			TIFICATION DATA		
	on requested for the	-			
•	•	er has been organized within the	•		
		er to vote or dispose, or direct th			
		corporate issuers and of corpora	ite general and managing partne	ers of partnership issu	uersand
	managing partner of				
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	☑ General Partner
Full Name (Last name first, if	individual)				,
Neon Capital Management G Business or Residence Address		Cit. Sam. 71- C-1-)			
Business of Residence Address	(Number and Stre	et, City, State, Zip Code)			
c/o Neon Liberty Capital Ma	nagement LLC, 236	Park Avenue, Suite 865, Nev	v York, NY 10169		
Check Box(es) that Apply:		Beneficial Owner	Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first, if i	ndividual)				
Neon Liberty Capital Manag					
Business or Residence Address	(Number and Stre	et, City, State, Zip Code)			
230 Park Avenue, Suite 865,	New York, NY 1010	69			
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner		Director	☐ General and/or Managing Partner
Full Name (Last name first, if	ndividual)				
Mehta, Satyen					
Business or Residence Address	Number and Stre	et, City, State, Zip Code)			
c/o Neon Liberty Capital Ma	nagement LLC, 23(Park Avenue, Suite 865, New	v York, NY 10169		
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	Member of GP; Principal of Neon	Director	General and/or Managing Partner
Full Name (Last name first, if i	ndividual)		5		
Baez-Sacasa, Alejandro					
Business or Residence Address	(Number and Stre	et, City, State, Zip Code)			
c/o Neon Liberty Capital Ma	nagement LLC, 230	Park Avenue, Suite 865, New	v York, NY 10169		
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	Member of GP; Principal of Neon	Director	General and/or Managing Partner
Full Name (Last name first, if	individual)				
Zheng, Fang					
Business or Residence Address	(Number and Stre	et, City, State, Zip Code)			
c/o Neon Liberty Capital Ma	nagement LLC, 230	Park Avenue, Suite 865, New	v York, NY 10169		
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	☐ Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if	ndividual)				
Business or Residence Address	(Number and Stre	et, City, State, Zip Code)			
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	General and/or Managing Partner
Full Name (Last name first, if	individual)			·	
Business or Residence Address	(Number and Stre	et, City, State, Zip Code)			
	(Use	blank sheet, or copy and use ad-	ditional copies of this sheet, as	necessary.)	

_					В.	INFORM	IATION	ABOUT (OFFERIN	G					
														Yes	No
1.	Has the issue	r sold, or d	oes the issu	er intend to	sell to nor	n-accredited	l investors i	in this offer	ring?	····				. 🗆	X
						also in App									
2.	What is the m (* or any les						vidual?	***************************************				•••••		. \$ <u>500.</u> Yes	000* No
3.	Does the offe	ring permit	joint owne	rship of a s	ingle unit?							•••••••	•••••	X	
4.	Enter the information agent of a broad to be listed as	for solicita ker or dea	ition of pure ler registere	chasers in o	connection SEC and/or	with sales or with a stat	of securities te or states,	s in the off	ering. If a	person to b	e listed is a sler. If mor	an associate re than five	d person o	r	
Ful	l Name (Last na	me first, if	individual)				· · · · · · · · · · · · · · · · · · ·								
No															
Bu	siness or Reside	nce Addres	s (Number	and Street,	City State,	Zip Code)									
Na	me of Associate	d Broker o	r Dealer												
Sta	tes in Which Pe	rson Listed	Has Solicit	ted or Inten	ds to Solic	it Purchase	rs							·····	
	(Check "A	II States" n	r check indi	ividual Stat	rec)								П	Ali St	ates
	[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	(FL)	[GA]	[HI]	[ID]	7117.01	
	[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]		
	[MT] [RI]	[NE] [SC]	[NV] [SD]	[NH] [TN]	[NJ] [TX]	[NM] [UT]	[NY] [VT]	[NC] [VA]	[ND] [WA]	[OH] [WV]	[OK] [WI]	[OR] [WY]	[PA] [PR]		
Ful	l Name (Last na		individual)												
Bu	siness or Reside	nce Addres	ss (Number	and Street,	City State,	Zip Code)									
	<u>-</u>				_										
Na	me of Associate	d Broker o	r Dealer									•			
Sta	tes in Which Pe	rson Listed	Has Solici	ted or Inten	ds to Solici	it Purchaser	·S			<u></u>		 .			
	(Check "A	il States" c	r check ind	ividual Stat	tes)									All St	ates
	[AL]	[AK]	[AZ]	[AR]	{CA}	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]		
	[IL] [MT]	[IN] [NE]	[IA] [NV]	[KS] [NH]	[KY] [NJ]	[LA] [NM]	[ME] [NY]	[MD] [NC]	[MA] [ND]	[MI] [OH]	[MN] [OK]	[MS] [OR]	[MO] [PA]		
	[RJ]	[SC]	[SD]	[NT]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]		
Ful	l Name (Last na	me first, if	individual)	1											
Bu	siness or Reside	nce Addres	s (Number	and Street,	City State,	Zip Code)		·······		· · · · · · · · · · · · · · · · · · ·					
_					_										
Na	me of Associate	d Broker o	r Dealer	 -											_
Sta	tes in Which Pe	rson Listed	Has Solici	ted or Inter	ids to Solic	it Purchase	rs								
	(Check "A	II States" c	r check ind	ividual Stat	tes)									All St	ates
	[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]		
	[IL] [MT]	[IN] [NE]	[IA] [NV]	[KS] [NH]	[KY] [NJ]	[LA] [NM]	[ME] [NY]	[MD] [NC]	[MA] [ND]	[MI] [OH]	[MN] [OK]	[MS] [OR]	[MO] [PA]		
	[RI]		[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]		

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

	C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND US	OF PROCEE	os	
1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box \square and indicate in the columns below the amounts of securities offered for exchange and already exchanged.			
	Type of Security C	Aggregate Offering Price (1)	An	nount Already Sold (2)
	Debt	S	\$	
	Equity	S	\$	
	☐ Common ☐ Preferred			
	Convertible Securities (including warrants)	S	\$	
	Partnership Interests	100,000,000	\$	220,000
	Other (Specify:	S	\$	
	Total	100,000,000	\$	220,000
	Answer also in Appendix, Column 3, if filing under ULOE.			
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."			
		Monton		Aggregate
		Number Investors	_	ollar Amount Purchases (2)
	Accredited Investors	3	\$	220,000
	Non-accredited Investors		· . \$	N/A:
	Total (for filings under Rule 504 only)	N/A	\$	N/A
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C- Question 1.		D	ollar Amount
	Type of offering	Type of Security		Sold
	Rule 505	N/A	\$	N/A
				N/A
	Regulation A	N/A	\$.	
	Regulation A		-	N/A
	-	N/A	-	N/A N/A
4.	Rule 504	N/A	-	
4.	Total a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check	N/A N/A	\$,	
4.	Total a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.	N/A N/A	\$. \$.	N/A
4.	Total	N/A N/A	\$ \$ \$_ \$_	N/A
4.	Total	N/A N/A	\$	50,000
4.	Total	N/A N/A C E	\$	50,000
4.	Total	N/A N/A	\$	50,000 10,000
4.	Total a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate. Transfer Agent's Fees Printing and Engraving Costs Legal Fees. Accounting Fees Engineering Fees	N/A N/A	\$	50,000 10,000

Reflects an estimate of initial costs only.

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

		C - Question 4.a. This difference is the "adjusted gross			
of to	the purposes shown. If the amount for any pu	proceeds to the issuer used or proposed to be used for each prose is not known, furnish an estimate and check the box ments listed must equal the adjusted gross proceeds to the babove.			
				Payments to Officers, Directors, and Affiliates	Payments to Others
Sa	laries and fees		X	\$(4)	□ \$
Pu	ırchase of real estate			\$	□ s
Pτ	irchase, rental or leasing and installation of mad	chinery and equipment		\$	□ s
Co	onstruction or leasing of plant buildings and fac	pilities		\$	□ s
	equisition of other businesses (including the va ay be used in exchange for the assets or securiti	lue of securities involved in this offering that es of another issuer pursuant to a merger)		S	□ s
Re	epayment of indebtedness			S	□ s
W	orking capital			S	□ s
OI	ther (specify): Investments	· · · · · · · · · · · · · · · · · · ·		\$	3 \$ 99,935,000
C	olumn Totals		X	\$(4)	□ \$ <u>99.935,000</u>
To	otal Payments Listed (column totals added)			⊠ \$	99,935,000
) Ne	eon Liberty Capital Management LLC, the i flected in the Issuer's Confidential Private P	nvestment manager, will be entitled to receive a manage lacement Memorandum. D. FEDERAL SIGNATURE	ment	fee at a quarterly i	ate equal to the amou
) No		lacement Memorandum.	ment	fee at a quarterly i	ate equal to the amour
) No re	enected in the Issuer's Confidential Private P	D. FEDERAL SIGNATURE the undersigned duly authorized person. If this notice is filed ities and Exchange Commission, upon written request of its	unde	r Rule 505, the follo	wing signature constitu
ne issue undert y non-s	effected in the Issuer's Confidential Private	D. FEDERAL SIGNATURE the undersigned duly authorized person. If this notice is filed ities and Exchange Commission, upon written request of its	unde	r Rule 505, the follof, the information ful	wing signature constitut
ne issue undert y non-t	er has duly caused this notice to be signed by the taking by the issuer to furnish to the U.S. Securaceredited investor pursuant to paragraph (b)(2 rint or Type) berty Emerging Markets Fund LP	D. FEDERAL SIGNATURE The undersigned duly authorized person. If this notice is filed ities and Exchange Commission, upon written request of its of Rule 502. Signature	unde	r Rule 505, the follof, the information ful	wing signature constitut
he issue n under ny non- suer (Pr eon Lit ame of	effected in the Issuer's Confidential Private	D. FEDERAL SIGNATURE the undersigned duly authorized person. If this notice is filed ities and Exchange Commission, upon written request of its of Rule 502.	unde	r Rule 505, the follof, the information ful	wing signature constitut

ATTENTION

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)